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Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Customer No. 23643		
Signature			
Printed name	Carli E. Stewart		
Date	July 1, 2005	Reg. No.	51,058

CERTIFICATE OF TRANSMISSION/MAILING

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Signature			
Typed or printed name	Mona Beaton	Date	July 1, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group: 3632

Confirmation No.: 3619

Application No.: 10/802,287

Invention: RADIAL ARM SYSTEM FOR
PATIENT CARE EQUIPMENT

Applicant: David C. NEWKIRK; et al.

Filed: March 17, 2004

Attorney

Docket: 7175-74606

Examiner: Robert G. Santos

Certificate Under 37 CFR 1.8(a)

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on July 1, 2005


(Signature)

Mona Beaton
(Printed Name)

RESPONSE TO ELECTION OF SPECIES REQUIREMENT

Mail Stop Amendments
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed June 6, 2005, please amend the above identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 9 of this paper. claims